

It seems to me, sir, that our climate out here and the settings over this whole coast area lead themselves more to art hobbies than anything we see in the East. The proof of this is the notable art colonies on this coast, and the products of their labors are world-famous in many instances.

Thus it seems to me that Doctor Krumbhaar's suggestion is well taken that we can organize a medical art association here patterned after the famous one of which Dr. Louis C. Schroeder of New York City is the head (his office is 50 East Seventy-second Street) and have, at least, yearly exhibits in one of our well-known art galleries.

In order to bring the idea of such an organization to the attention of the medical men of this coast, I wish you could either publish this letter, or better yet, make excerpts from it so that any professional men out here who may be interested could get in touch with me so we may get together for a preliminary discussion of this matter.

Hoping I have made the matter clear to you and that in the next issue of CALIFORNIA AND WESTERN MEDICINE you may get it before the medical men at large, I am

Respectfully yours,

F. H. REDEWILL, M.D.,

1162-1168 Flood Building, San Francisco.
Johns Hopkins, 1906.

TWENTY-FIVE YEARS AGO*

EXCERPTS FROM OUR STATE MEDICAL JOURNAL

Vol. V, No. 3, March 1907

From some editorial notes:

Society Work.—Is it worth while to be alive, or might one just as well be dead? "To be or not to be, that is the question." If one is going to live, why not live fully and helpfully and die with the knowledge that the world is at least no worse off for our having cumbered it for a brief space. There are so many things to be done, so much work waiting to one's hand, that it seems incredible that there can be any who may go through the world and live their lives without appreciating it. And for us, as physicians, there is perhaps more work than for others, who understand less well, all that needs to be done. . . .

. . . Our inertia, our apathy and our failure to do our duty by the community are responsible for many things. Often the good work that a few men might do in a county is hindered or prevented by the petty jealousy of two or three men who will not do anything toward making an active county society themselves, nor will they permit others to do what they should and would like to do. Is there no way of waking up those who are asleep? Is there no way of galvanizing a little life into some of our profession who are really two-thirds dead and don't know it?

Possible Strength.—None knows so well as the physician that it is not only wrong but dangerous to allow public health institutions to be political playthings. The average competent and reputable physician will not devote his time to "making good" with local politicians, nor to being a "good fellow" and a "glad-hand artist" with the voters of his community merely to gain support that will eventually mean some political office. He is, as a rule, too busy with his study or his practice and he does not seem to realize that political work need not necessarily be done in the "glad hand" style. He thinks it must be so

* This column strives to mirror the work and aims of colleagues who bore the brunt of state society work some twenty-five years ago. It is hoped that such presentation will be of interest to both old and recent members.

done, and so he wraps the ten talents of his influence in the covering of his self-esteem and buries them; he allows his potential strength to lie dormant. . . .

Educational Campaign.—How are we going to bring about any betterment of this condition of things? By helping to take the control of our State, which is the legislature, out of the hands of cheap and unworthy politicians. And how can we help in doing that? By showing the better element in our various communities the actual and definite harm that is resulting from political control of the sick, and the tremendous expense to the State of lack of proper sanitary control. . . .

Support the Association.—Doubtless but few of us realize as yet the tremendously valuable work which is being done for the medical profession of this country by the American Medical Association through its Council on Pharmacy and Chemistry. . . .

From an article on "Remarks on the Present Status of Intranasal Surgery" by Louis C. Deane, M. D., San Francisco.

In the past six years such rapid strides have been made in intranasal surgery that those who have not kept in active touch with the workers in this field and with the literature, can hardly conceive the splendid progress that has been made and of the remarkable achievements of such men as Killian, Hajek, Jansen, Luc, and Grünwald. . . .

From an article on "Diagnosis and Treatment of Ectopic Pregnancy" by George B. Somers, M. D.

One of the most interesting conditions met with in the diseases of women is ectopic pregnancy. It fixes the attention because of its insidious nature, the obscurity of its symptoms, and because it often ends fatally even before the true situation is realized. . . .

From an article on "European Clinics" by Edward C. Sewall, M. D., San Francisco.

On my recent visit to the clinics in Europe I saw many things that interested me. Many of them I have already found of great advantage in my work and I present them with the hope that some of the points may possibly be of interest to you. . . .

From an article on "Reports of Focal Operations in Hip-Joint Tuberculosis—A Discussion Finished" by Harry M. Sherman, A. M., M. D., San Francisco.

When Doctor Huntington read his paper before the society, describing and discussing his three operations of tunneling the neck of the femur to reach a tuberculous focus in the femoral neck or head, all of which had been successful, I was invited to open the discussion. . . .

From an article on "Demonstration of a Patient Showing the Effect of the X-Ray on the Epithelial Structures of the Skin" by Douglass W. Montgomery, M. D., San Francisco.

. . . After the x-raying of four years ago, the hair fell out of the scalp adjacent to the right ear, and also out of the beard of the right side of the face. The hair of the scalp has partially grown in, but that of the right side of the face has not returned; not even as downy hair. The bald skin is not atrophic, and looks much better, from a cosmetic point of view, than the skin of the rest of the face. . . .